

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10081285

## CLAIMS AS FILED - PART I

|   | (Column 1)     | (Column 2)   |
|---|----------------|--------------|
| TOTAL CLAIMS  | 7              |              |
| FOR   | NUMBER FILED   | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | 7 minus 20 = * | 0            |
| INDEPENDENT CLAIMS  | 1 minus 3 = *  | 0            |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |                |              |

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY  
TYPE ☐

| RATE      | FEE    |
|-----------|--------|
| BASIC FEE | 370.00 |
| X\$ 9=    |        |
| X42=      |        |
| +140=     |        |
| TOTAL     |        |

OR OTHER THAN  
SMALL ENTITY

| RATE      | FEE    |
|-----------|--------|
| BASIC FEE | 740.00 |
| X\$18=    |        |
| X84=      |        |
| +280=     |        |
| TOTAL     | 740    |

## CLAIMS AS AMENDED - PART II

2-22-02

|             |   | (Column 1)                                |   | (Column 2)                                  | (Column 3)       |
|-------------|---|---|---|---|------------------|
| AMENDMENT A |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |   | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|             | Total   | *   | 7 | Minus                                       | **               |
|             | Independent   | *   | 1 | Minus                                       | ***              |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |   |   |   |                  |

SMALL ENTITY

| RATE                | ADDI-<br>TIONAL<br>FEE |
|---------------------|------------------------|
| X\$ 9=              |                        |
| X42=                |                        |
| +140=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

OR

OTHER THAN  
SMALL ENTITY

| RATE                | ADDI-<br>TIONAL<br>FEE |
|---------------------|------------------------|
| X\$18=              |                        |
| X84=                |                        |
| +280=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

4-3-04

|             |   | (Column 1)                                |    | (Column 2)                                  | (Column 3)       |
|-------------|---|---|----|---|------------------|
| AMENDMENT B |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |    | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|             | Total   | *   | 12 | Minus                                       | **               |
|             | Independent   | *   | 2  | Minus                                       | ***              |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |   |    |   |                  |

| RATE                | ADDI-<br>TIONAL<br>FEE |
|---------------------|------------------------|
| X\$ 9=              |                        |
| X42=                |                        |
| +140=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

OR

| RATE                | ADDI-<br>TIONAL<br>FEE |
|---------------------|------------------------|
| X\$18=              |                        |
| X84=                |                        |
| +280=               |                        |
| TOTAL<br>ADDIT. FEE | 0                      |

3-10-05

|             |   | (Column 1)                                |    | (Column 2)                                  | (Column 3)       |
|-------------|---|---|----|---|------------------|
| AMENDMENT C |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |    | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|             | Total   | *   | 12 | Minus                                       | **               |
|             | Independent   | *   | 2  | Minus                                       | ***              |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |   |    |   |                  |

| RATE                | ADDI-<br>TIONAL<br>FEE |
|---------------------|------------------------|
| X\$ 9=              |                        |
| X42=                |                        |
| +140=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

OR

| RATE                | ADDI-<br>TIONAL<br>FEE |
|---------------------|------------------------|
| X\$18=              | NO                     |
| X84=                | FEE                    |
| +280=               | DUE                    |
| TOTAL<br>ADDIT. FEE | -0                     |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
  - \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
  - \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.